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EXAMINER

SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

TO:

TO: Registration Division of	n Section Corporations			
SUBJECT:	Print Quickness [Design & Marketing, LLC		
		ited Liability Company		
The enclosed Article	s of Amendment and fee(s) are sul	bmitted for filing.		
Please return all corre	espondence concerning this matter	r to the following:		
	100000	Dustin Turcik		
		Name of Person		
	Firm/Company			
	5081 Foxbridge Circle Apt #154			
		Address		
		Clearwater, FL 33760	2010 MAR 26 SECRETAR) ALLAHASSI	
	inf	City/State and Zip Code O@abcsolutionsfl.com	HAR 26 AM R RETARY OF STAHASSEE, FLI	
	E-mail address: (to be used for future annual report notificati		
For further information	on concerning this matter, please of	call:	9-6211 09-6211	
	Dustin Turicik	at (9-6211 BH 5	
Nar	ne of Person	Area Code & Daytime Te	lephone Number	
Enclosed is a check f	or the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Rej Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 lahassee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Print Quickness De	sign & Marketin	g, LLC	
(Name of the Limited Liability Com (A Florida Limite	i <mark>pany as it now appear</mark> ad Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Compa	any were filed on	10/25/2007	and assigned
Florida document numberL07000108144			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	iability company her	<u>e</u> :	
IQ Print N	Media, LLC		
The new name must be distinguishable and end with the words "L.L.C."	imited Liability Compa	ny," the designation	"LLC" or the abbreviation
D.D.C.			70 2
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			AR F
			ASS 28
			₩
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·		35 9
interior warress mill bullion of the bon			- 2
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		ur records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Ent	er Florida street a	ddress
	, Florida		
	City		Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member

Title <u>Name</u> **Address Type of Action MGRM** Zachary Turicik 5081 Foxbridge Circle √ Add Apt #154 ☐ Remove Clearwater, FL 33760 Jamie Limbaugh MGRM 315 11th Ave SW ✓ Add Largo, FL 33770_ Remove **Dustin Turicik** MGRM 2931 South Pine Drive Ant.#34 Remove Largo, FL 33771 **Dustin Turicik** Add Remove MGRM 5081 Foxbridge Circle Apt.#154 Clearwater, FL 33760 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member **Dustin Turicik** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00